

APPENDIX 4 – Annual Report Form for Secondary Permittees

This Annual Report covers the _____ calendar year.

Two printed copies and one electronic copy of this report are due to Ecology by March 31. Complete sections I through VIII. Do not leave any questions blank.

I. Contact Person

<i>Contact Name</i>	<i>Phone Number</i>	
<i>Entity Name</i>		
<i>Mailing Address</i>		
<i>City</i>	<i>State</i>	<i>Zip + 4</i>
<i>Email Address:</i>		

II. Regulated Small MS4 Location

<i>Jurisdiction</i>
<i>Entity Type:</i> <input type="checkbox"/> Port <input type="checkbox"/> Diking/drainage district <input type="checkbox"/> Flood control district <input type="checkbox"/> College/University <input type="checkbox"/> Public school district <input type="checkbox"/> Park district <input type="checkbox"/> State agency _____ <input type="checkbox"/> Other _____
<i>Major receiving water(s):</i>

III. Stormwater Management Program Implementation Status

Complete the appropriate section a through f, below, for the report for the current year. Include the completed section(s) for any prior year(s) with each annual report.

a. First annual report

YES <input type="checkbox"/>	NO <input type="checkbox"/>	Complied with all relevant ordinances, rules, and regulations of the local jurisdiction(s) that govern non-stormwater discharges; construction phase stormwater pollution prevention measures; and post-construction stormwater pollution prevention measures, including proper operation and maintenance of the MS4? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Applied the MTRs in Appendix 1 to all new public projects? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have NPDES permit coverage for all applicable construction projects owned or operated by the Permittee? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided access, as requested, for inspection of construction sites during the active grading and/or construction period? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided training for relevant staff in erosion and sediment control BMPs and requirements, or hired trained contractors to perform the work? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have NPDES permit coverage for all applicable industrial facilities owned or operated by the Permittee? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Developed, adopted, and implemented policies prohibiting illicit discharges and illegal dumping, including an enforcement plan? <i>Attach a copy of the policies and enforcement plan and a summary of illicit discharges discovered and actions taken to eliminate the discharges.</i> <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Conducted spot checks of stormwater facilities after major storms? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided adequate training for staff to carry out the SWMP? <i>Comments:</i>

b. Second annual report

YES <input type="checkbox"/>	NO <input type="checkbox"/>	Complied with all relevant ordinances, rules, and regulations of the local jurisdiction(s) that govern non-stormwater discharges; construction phase stormwater pollution prevention measures; and post-construction stormwater pollution prevention measures, including proper operation and maintenance of the MS4? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Applied the MTRs in Appendix 1 to all new public projects? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have NPDES permit coverage for all applicable construction projects owned or operated by the Permittee? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided access, as requested, for inspection of construction sites during the active grading and/or construction period? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided training for relevant staff in erosion and sediment control BMPs and requirements, or hired trained contractors to perform the work? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have NPDES permit coverage for all applicable industrial facilities owned or operated by the Permittee? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Implemented policies prohibiting illicit discharges and illegal dumping, including an enforcement plan? <i>Attach a summary of illicit discharges discovered and actions taken to eliminate the discharges.</i> <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Conducted field inspections and visually inspect for illicit discharges during dry weather at approximately one third of all known outfalls? Number of outfalls inspected: ____ <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Conducted spot checks of stormwater facilities after major storms? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided adequate training for staff to carry out the SWMP? <i>Comments:</i>

c. Third annual report

YES <input type="checkbox"/>	NO <input type="checkbox"/>	Complied with all relevant ordinances, rules, and regulations of the local jurisdiction(s) that govern non-stormwater discharges; construction phase stormwater pollution prevention measures; and post-construction stormwater pollution prevention measures, including proper operation and maintenance of the MS4? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Applied the MTRs in Appendix 1 to all new public projects? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have NPDES permit coverage for all applicable construction projects owned or operated by the Permittee? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided access, as requested, for inspection of construction sites during the active grading and/or construction period? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided training for relevant staff in erosion and sediment control BMPs and requirements, or hired trained contractors to perform the work? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have NPDES permit coverage for all applicable industrial facilities owned or operated by the Permittee? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Implemented policies prohibiting illicit discharges and illegal dumping, including an enforcement plan? <i>Attach a summary of illicit discharges discovered and actions taken to eliminate the discharges.</i> <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Labeled at least 50% of all storm drain inlets owned or operated by the Permittee that are located in maintenance yards, in parking lots, along sidewalks, and at pedestrian access points? Number of inlets labeled: ____ <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/> NA <input type="checkbox"/>	Distributed educational information to tenants and residents about the impact of stormwater discharges on receiving waters and steps that can be taken to reduce pollutants in stormwater runoff? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Conducted field inspections and visually inspect for illicit discharges during dry weather at approximately one third of all known outfalls? Number of outfalls inspected: ____

<i>Comments:</i>		
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Conducted spot checks of stormwater facilities after major storms?
<i>Comments:</i>		
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Developed and implemented an O&M plan?
<i>Comments:</i>		
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided adequate training for staff to carry out the SWMP?
<i>Comments:</i>		

d. **Fourth annual report**

YES <input type="checkbox"/>	NO <input type="checkbox"/>	Complied with all relevant ordinances, rules, and regulations of the local jurisdiction(s) that govern non-stormwater discharges; construction phase stormwater pollution prevention measures; and post-construction stormwater pollution prevention measures, including proper operation and maintenance of the MS4? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Applied the MTRs in Appendix 1 to all new public projects? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have NPDES permit coverage for all applicable construction projects owned or operated by the Permittee? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided access, as requested, for inspection of construction sites during the active grading and/or construction period? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided training for relevant staff in erosion and sediment control BMPs and requirements, or hired trained contractors to perform the work? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have NPDES permit coverage for all applicable industrial facilities owned or operated by the Permittee? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Implemented policies prohibiting illicit discharges and illegal dumping, including an enforcement plan? <i>Attach a summary of illicit discharges discovered and actions taken to eliminate the discharges.</i> <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Distributed educational information to tenants and residents about the impact of stormwater discharges on receiving waters and steps that can be taken to reduce pollutants in stormwater runoff?
	NA <input type="checkbox"/>	<i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Conducted field inspections and visually inspect for illicit discharges during dry weather at approximately one third of all known outfalls? Number of outfalls inspected: ____ <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Conducted spot checks of stormwater facilities after major storms? <i>Comments:</i>

YES <input type="checkbox"/>	NO <input type="checkbox"/>	Implementing an O&M plan? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided adequate training for staff to carry out the SWMP? <i>Comments:</i>

e. **Fifth annual report**

YES <input type="checkbox"/>	NO <input type="checkbox"/>	Complied with all relevant ordinances, rules, and regulations of the local jurisdiction(s) that govern non-stormwater discharges; construction phase stormwater pollution prevention measures; and post-construction stormwater pollution prevention measures, including proper operation and maintenance of the MS4? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Applied the MTRs in Appendix 1 to all new public projects? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have NPDES permit coverage for all applicable construction projects owned or operated by the Permittee? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided access, as requested, for inspection of construction sites during the active grading and/or construction period? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided training for relevant staff in erosion and sediment control BMPs and requirements, or hired trained contractors to perform the work? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have NPDES permit coverage for all applicable industrial facilities owned or operated by the Permittee? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Implemented policies prohibiting illicit discharges and illegal dumping, including an enforcement plan? <i>Attach a summary of enforcement actions taken.</i> <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Labeled all storm drain inlets owned or operated by the Permittee that are located in maintenance yards, in parking lots, along sidewalks, and at pedestrian access points? Number of inlets labeled: ____ <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/> NA <input type="checkbox"/>	Distributed educational information to tenants and residents addressing all relevant topics? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Conducted field inspections and visually inspect for illicit discharges during dry weather at approximately one third of all known outfalls? Number of outfalls inspected: ____ <i>Comments:</i>

YES <input type="checkbox"/>	NO <input type="checkbox"/>	Developed a storm sewer system map showing all known storm drain outfalls and receiving waters and delineating the areas contributing runoff to each outfall? <i>Attach a summary of the status of the mapping; include the map only if requested by Ecology.</i> <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Developed and implemented procedures to identify and remove any illicit discharges discovered during inspections? <i>Attach a summary of illicit discharges discovered and actions taken to eliminate the discharges.</i> <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Developed and implemented a spill response plan that includes coordination with a qualified spill responder? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided staff training for all relevant staff on proper best management practices for preventing spills and illicit discharges? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Trained all employees whose construction, operations, or maintenance job functions may impact stormwater quality? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Conducted spot checks of stormwater facilities after major storms? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Implementing an O&M plan? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Published a public notice in the local newspaper and solicited public review of the SWMP? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Fully developed and implemented the SWMP and made it available to the public? <i>Attach a copy of the updated SWMP.</i> If SWMP is posted on webpage, list site address: ____ <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided adequate training for staff to carry out the SWMP? <i>Comments:</i>

f. Sixth and following annual reports (if needed)

YES <input type="checkbox"/>	NO <input type="checkbox"/>	Complied with all relevant ordinances, rules, and regulations of the local jurisdiction(s) that govern non-stormwater discharges; construction phase stormwater pollution prevention measures; and post-construction stormwater pollution prevention measures, including proper operation and maintenance of the MS4? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Applied the MTRs in Appendix 1 to all new public projects? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have NPDES permit coverage for all applicable construction projects owned or operated by the Permittee? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided access, as requested, for inspection of construction sites during the active grading and/or construction period? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided training for relevant staff in erosion and sediment control BMPs and requirements, or hired trained contractors to perform the work? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have NPDES permit coverage for all applicable industrial facilities owned or operated by the Permittee? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Implemented policies prohibiting illicit discharges and illegal dumping, including an enforcement plan? <i>Attach a summary of enforcement actions taken.</i> <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Relabeled storm drain inlets where necessary, and labeled any new inlets? Number of inlets labeled: _____ <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Distributed educational information to tenants and residents about the impact of stormwater discharges on receiving waters and steps that can be taken to reduce pollutants in stormwater runoff? <i>Comments:</i>
	NA <input type="checkbox"/>	
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Conducted field inspections and visually inspect for illicit discharges during dry weather at approximately one third of all known outfalls? Number of outfalls inspected: _____ <i>Comments:</i>

YES <input type="checkbox"/>	NO <input type="checkbox"/>	Updated the storm sewer system map? <i>Attach a summary of the updates; include the map only if requested by Ecology.</i> <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Implementing procedures to identify and remove any illicit discharges discovered during inspections? <i>Attach a summary of illicit discharges discovered and actions taken to eliminate the discharges.</i> <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Implementing a spill response plan that includes coordination with a qualified spill responder? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Conducted spot checks of stormwater facilities after major storms? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Implementing an O&M plan? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provided adequate training for staff to carry out the SWMP? <i>Comments:</i>

IV. Information Collection

List below either the results of information collected and analyzed during the reporting period, including monitoring data (if any) and how to contact for additional information OR summarize the results of information collected and indicate how more complete information can be obtained.

V. Program Assessment (complete this section for the third and following annual reports)**a. Evaluation of your SWMP**

You are required to assess the appropriateness of the BMPs you have selected to implement your SWMP. This evaluation is necessary to evaluate whether the MEP standard set by the permit is protective of water quality in your receiving water bodies. This assessment may be entirely qualitative. Select “N/A” if you are not yet implementing BMPs for a component of the SWMP.

YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>	Are the BMPs selected and implemented for Public Outreach appropriate to minimize pollutants in the MS4 to the MEP? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>	Are the BMPs selected and implemented for Public Involvement appropriate to minimize pollutants in the MS4 to the MEP? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>	Are the BMPs selected and implemented for Illicit Discharge Detection and Elimination appropriate to minimize pollutants in the MS4 to the MEP? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>	Are the BMPs selected and implemented for Construction Stormwater Pollution Prevention appropriate to minimize pollutants in the MS4 to the MEP? <i>Comments:</i>

YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>	Are the BMPs selected and implemented for Post-Construction Runoff Management appropriate to minimize pollutants in the MS4 to the MEP? <i>Comments:</i>
YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>	Are the BMPs selected and implemented for Good Housekeeping for Municipal Operations appropriate to minimize pollutants in the MS4 to the MEP? <i>Comments:</i>

b. Changes in BMPs or objectives

If any of the BMPs or objectives is being changed, list the old BMP and objective, the new BMP and objective, and a justification for the change below.	
Old BMP:	Old Objective:
New BMP:	New Objective:
Justification for change:	
Old BMP:	Old Objective:
New BMP:	New Objective:
Justification for change:	

VI. Relying on another Governmental Entity

If you are relying on another governmental entity to satisfy one or more of the permit obligations, list the entity and the permit obligation they are implementing on your behalf below. *Attach a copy of your agreement with the other entity.*

VII. Certification

I certify under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that Qualified Personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for willful violations.

Name: _____
Title: _____

Date

VIII. Submittal

Deliver two printed copies and one electronic copy (MS Word format or PDF, on CD ROM) of this report by March 31 to:

Department of Ecology
Water Quality Program
Municipal Stormwater Permits
P.O. Box 47696
Olympia, WA 98504-7696